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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this an amended filing

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself			
	_		About Debtor 1:	Abo	out Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name			
	your pictu exan	e the name that is on government-issued ire identification (for nple, your driver's	Carolyn First name	First	t name
	licen	se or passport).	Middle name	Midd	dle name
	ident	g your picture tification to your ting with the trustee.	Williams Last name and Suffix (Sr., Jr., II, III)	Last	t name and Suffix (Sr., Jr., II, III)
2.		ther names you have d in the last 8 years			
		de your married or den names.			
3.	your num Indiv	the last 4 digits of Social Security ber or federal vidual Taxpayer tification number	xxx-xx-9311		

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Debtor 1 Carolyn Williams

Where you live

Why you are choosing

this district to file for

bankruptcy

Case number (if known) About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Business name(s) Business name(s) Include trade names and doing business as names EINs EINs If Debtor 2 lives at a different address: 4512 Winchester LN UNIT C Yorkville, IL 60560 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code

Kendall County

Check one:

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

Check one:

mailing address.

County

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

If Debtor 2's mailing address is different from yours, fill it

in here. Note that the court will send any notices to this

Number, P.O. Box, Street, City, State & ZIP Code

I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Carolyn Williams

Case number (if known)

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	☐ Chapter 7							
		☐ Cha	apter 11						
		☐ Ch	apter 12						
		■ Ch	apter 13						
8.	How you will pay the fee	■ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's chorder. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card a pre-printed address.						money	
						this option, si	gn and attach the Application for Individuals to	o Pay	
			_	e in Installments (O	•	thic antion only	<i>i</i> if you are filing for Chapter 7. By law, a judge	n mau	
		— k	out is not requent hat applies to	uired to, waive your your family size a	fèe, and may do so nd you are unable to	only if your ind pay the fee in	come is less than 150% of the official poverty installments). If you choose this option, you rall Form 103B) and file it with your petition.	line 🧍	
) .	Have you filed for □ No. bankruptcy within the last 8 years? □ Yes.								
			District	ILNBKE	When	8/31/13	Case number 13-34911		
			District		When		Case number		
			District		When		Case number		
10.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes							
			Debtor				Relationship to you		
			District		When		Case number, if known		
			Debtor				Relationship to you		
			District		When		Case number, if known		
11.	Do you rent your residence?	■ No.	Go to li	ne 12.					
	residence:	☐ Yes	. Has yo	ur landlord obtained	d an eviction judgme	ent against you	and do you want to stay in your residence?		
				No. Go to line 12.					
				00 100					

Deb	tor 1 Carolyn Williams		Document Page 4 of 32 Case number (if known)					
Part	Report About Any Bu	sinesses	You Own as a Sole Proprietor					
12.	Are you a sole proprietor of any full- or part-time business?	□ No.	Go to Part 4.					
		Yes.	Name and location of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation,		Carolyn Williams Name of business, if any					
	partnership, or LLC. If you have more than one sole proprietorship, use a		4512 Winchester LN UNIT C Yorkville, IL 60560					
	separate sheet and attach it to this petition.		Number, Street, City, State & ZIP Code Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A))					
			Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))					
			Stockbroker (as defined in 11 U.S.C. § 101(53A))					
			Commodity Broker (as defined in 11 U.S.C. § 101(6))					
			None of the above					
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline: operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).					
		No.	I am not filing under Chapter 11.					
	For a definition of <i>small</i> business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankrup Code.	otcy				
		☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy C	ode.				
Part	•	Have Any	y Hazardous Property or Any Property That Needs Immediate Attention					
14.	Do you own or have any property that poses or is	No.						
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?					
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?					
	For example, do you own perishable goods, or							

livestock that must be fed,

or a building that needs urgent repairs?

Number, Street, City, State & Zip Code

Where is the property?

Debtor 1 Carolyn Williams

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Case number (if known)

Part 5: Explain

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filled for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a

mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a	a briefing about credit
counseling because of:	

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

Disability. My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 32 Case number (if known) Debtor 1 Carolyn Williams Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative ☐ Yes. after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **□** \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Carolyn Williams Signature of Debtor 2 Carolyn Williams Signature of Debtor 1 Executed on December 29, 2015 Executed on

MM / DD / YYYY

MM / DD / YYYY

Debtor 1 Carolyn Williams Document Page 7 of 32 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Joseph Weiler	Date	December 29, 2015
Signature of Attorney for Debtor		MM / DD / YYYY
Joseph Weiler		
Printed name		
THE SEMRAD LAW FIRM, LLC		
Firm name		
20 S. Clark Street		
28th Floor		
Chicago, IL 60603		
Number, Street, City, State & ZIP Code		
Contact phone (312) 913 0625	nail address	rsemrad@semradlaw.com
6301154		
Par number 9 State		

		DOGUIII	THE FAUL OUT 32	
Fill in this infor	mation to identify your	case:		
Debtor 1	Carolyn Williams First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	13,986.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	13,986.00
Par	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	17,394.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	7,141.53
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	35,313.42
	Your total liabilities	\$	59,848.95
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,557.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,317.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	our other so	chedules.
7.	■ Yes What kind of debt do you have?		
	Your dabts are primarily consumer dabts. Consumer dabts are those "incurred by an individual primarily for	a norsana	l family or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

0.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	To	tal claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	7,141.53
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	13,567.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	20,708.53

Case 15-43508 Doc 1 Filed 12/29/15 Entered 12/29/15 17:17:55 Desc Main Page 10 of 32 Document Fill in this information to identify your case and this filing: Debtor 1 Carolyn Williams Middle Name Last Name First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Honda 3 1 Make: Who has an interest in the property? Check one. the amount of any secured claims on Schedule D: Pilot Model: ■ Debtor 1 only Creditors Who Have Claims Secured by Property. Year: 2008 Debtor 2 only Current value of the Current value of the Approximate mileage: 123000 Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$11,025.00 \$11.025.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$11.025.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the

portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

De	ebtor 1	Carolyn Willi	ams Document Page 11 of 32 Case number (if known)	
■ Voc		Danasila		
	■ Yes.	Describe	Used Frunture	\$300.00
			Cood i fundio	
7.	Electron Example	les: Televisions a	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music I phones, cameras, media players, games	collections; electronic devices
		Describe		
	— 165.	Describe	Cell Phone, Used Computer, 3 tvs: 1 x 36", and 2 x 32"	\$650.00
В.			d figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coir ions, memorabilia, collectibles	n, or baseball card collections;
	■ No □ Yes.	Describe	one, memorabilia, conconsico	
Э.		nent for sports a les: Sports, photo musical instr	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
	_	Describe		
10.	Firearr Examp		es, shotguns, ammunition, and related equipment	
	_	Describe		
11.	Clothe Examp		lothes, furs, leather coats, designer wear, shoes, accessories	
	■ Yes.	Describe	Used Clothes	\$350.00
12.	■ No		ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
13.	Exam	arm animals ples: Dogs, cats,	birds, horses	
	■ No □ Yes.	Describe		
	■ No	-	nd household items you did not already list, including any health aids you did not list	
	⊔ Yes.	Give specific in	formation	
15			of all of your entries from Part 3, including any entries for pages you have attached number here	\$1,300.00
Pa	rt 4: De	scribe Your Finan	cial Assets	
De	o you ov	wn or have any ∣	legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No	<i>ples:</i> Money you	have in your wallet, in your home, in a safe deposit box, and on hand when you file your petit	ion

Case 15-43508 Doc 1 Filed 12/29/15 Entered 12/29/15 17:17:55 Desc Main Document Page 12 of 32 Case number (if known) Debtor 1 Carolyn Williams 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Rush Pre-Paid Card \$0.00 17.1. Fifth Third Bank-Checking 17.2. \$66.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☐ No Institution name or individual: Yes. Residential Lease Security Deposit \$1,595.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

☐ Yes. Give specific information about them...

☐ Yes. Give specific information about them...

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

De	btor 1	Carolyn Williams	Document	Page 13 of 32 Case number (if known)	
27.	Licens	es, franchises, and other gene	ral intangibles	<u> </u>	
	Examp ■ No	oles: Building permits, exclusive I	icenses, cooperative associati	on holdings, liquor licenses, professional licer	nses
	☐ Yes.	Give specific information about	them		
Mo	oney or	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax ref □ No	unds owed to you			
	Yes.	Give specific information about t	hem, including whether you all	ready filed the returns and the tax years	
			2014 & 2015 Anticipated likely total around \$2 will likelyly offset the claim by these antici	2,000.00 and the IRS ir priority proof of	\$0.00
	Examp ■ No	·	ny, spousal support, child sup	port, maintenance, divorce settlement, proper	ty settlement
	☐ Yes.	Give specific information			
	Examp ■ No	amounts someone owes you oles: Unpaid wages, disability ins benefits; unpaid loans you r		nefits, sick pay, vacation pay, workers' comp	pensation, Social Security
	Examp	sts in insurance policies oles: Health, disability, or life insu	rance; health savings account	(HSA); credit, homeowner's, or renter's insur	ance
	■ No □ Yes.	Name the insurance company of Company		Beneficiary:	Surrender or refund value:
	If you a someo	terest in property that is due your the beneficiary of a living trustone has died. Give specific information		ied insurance policy, or are currently entitled to re	eceive property because
	00.	Olvo oposino ililolinatorii.			
	Examp —	against third parties, whether ples: Accidents, employment disp		uit or made a demand for payment tts to sue	
	■ No □ Yes.	Describe each claim			
	Other o	contingent and unliquidated cl	aims of every nature, includi	ng counterclaims of the debtor and rights	to set off claims
	☐ Yes.	Describe each claim			
	Any fin ■ No	ancial assets you did not alrea	dy list		
	☐ Yes.	Give specific information			
36				any entries for pages you have attached	\$1,661.00
Par	+ 5: Do	scribe Any Rusiness-Related Prone	rty Vou Own or Have an Interest	In List any real estate in Part 1	

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Case number (if known) Document Debtor 1 Carolyn Williams 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$11,025.00 57. Part 3: Total personal and household items, line 15 \$1,300.00 58. Part 4: Total financial assets, line 36 \$1,661.00 59. Part 5: Total business-related property, line 45 \$0.00 \$0.00 Part 6: Total farm- and fishing-related property, line 52 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$13,986.00 \$13,986.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$13,986.00

Official Form 106A/B Schedule A/B: Property page 5

Fill in this info	rmation to identify your	case:		
Debtor 1	Carolyn Williams			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.
Used Frunture Line from Schedule A/B: 6.1	\$300.00	\$300.00 735 ILCS 5/12-1001(b)
Ellie Holli Galedale A.E. G. 1		□ 100% of fair market value, up to any applicable statutory limit
Cell Phone, Used Computer, 3 tvs: 1 x 36", and 2 x 32"	\$650.00	\$650.00 735 ILCS 5/12-1001(b)
Line from Schedule A/B: 7.1		□ 100% of fair market value, up to any applicable statutory limit
Used Clothes Line from Schedule A/B: 11.1	\$350.00	\$350.00 735 ILCS 5/12-1001(a)
Ellie IIoni Gonedale 775. TT. T		100% of fair market value, up to any applicable statutory limit
Rush Pre-Paid Card Line from Schedule A/B: 17.1	\$0.00	\$0.00 735 ILCS 5/12-1001(b)
Line noin Schedule A.B. 17.1		☐ 100% of fair market value, up to any applicable statutory limit
Fifth Third Bank-Checking	\$66.00	\$66.00 735 ILCS 5/12-1001(b)
Line Holli Genedule AVD. 11.2		100% of fair market value, up to any applicable statutory limit

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- Caroly II II mail in				
Brief description of the property and line on Schedule A/B that lists this property	edule A/B that lists this property portion you own Copy the value from Check only one box for each exempti		· · ·	Specific laws that allow exemption
Residential Lease Security Deposit Line from <i>Schedule A/B</i> : 22.1	\$1,595.00	■	\$1,595.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
2014 & 2015 Anticipated tax refunds will likely total around \$2,000.00 and the IRS will likelyly offset their priority proof of claim by these anticipated refunds. Line from Schedule A/B: 28.1	\$0.00		\$0.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Are you claiming a homestead exemption (Subject to adjustment on 4/01/16 and every ■ No □ Yes. Did you acquire the property cover □ No □ Yes	3 years after that for ca	ases f	,	,

		Document	Page 17	of 32		
Fill in this informat	tion to identify you	ur case:				
Debtor 1	Carolyn Williams					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankı	ruptcy Court for the	: NORTHERN DISTRICT OF II	LLINOIS			
Case number						
(if known)						if this is an ded filing
Official Form	106D					
Schedule D	: Creditors	Who Have Claims	Secured	by Propert	y	12/15
		f two married people are filing togeth , number the entries, and attach it to				
1. Do any creditors hav	ve claims secured by	vour property?				
	-	this form to the court with your oth	er schedules Yo	ou have nothing else	to report on this form	
_		•	or soriculies. To	od nave notning cise	to report on this form.	
	I of the information	below.				
Part 1: List All S	Secured Claims			Column A	Column B	Column C
each claim. If more that	an one creditor has a p	nore than one secured claim, list the creaticular claim, list the other creditors in ler according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 Santander C	onsumer USA	Describe the property that secures	the claim:	\$17,394.00	\$11,025.00	\$6,369.00
Creditor's Name		2008 Honda Pilot 123000 m	iles			
Po Box 9612 Fort Worth, 1		As of the date you file, the claim is apply.	: Check all that			
	ty, State & Zip Code	☐ Contingent				
Number, Street, Cit	ly, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply				
Debtor 1 only		An agreement you made (such as	mortgage or secu	red		
Debtor 2 only		car loan)				
Debtor 1 and Debto	•	Statutory lien (such as tax lien, me	echanic's lien)			
At least one of the o		Judgment lien from a lawsuit	Automobil			
Check if this claim community debt	relates to a	Other (including a right to offset)	Automobil PMSI	<u> </u>		
	Opened 9/01/14 Last Active					
Date debt was incurre		Last 4 digits of account num	nber 1000			
Add the dollar value	of your entries in Co	olumn A on this page. Write that num	ber here:	\$17,39	94 00	
	=	the dollar value totals from all pages.		\$17,39		
Write that number h	ere:			φ17,38	74.00	
Part 2: List Other	s to Be Notified fo	or a Debt That You Already Liste	ed			
to collect from you for	r a debt you owe to see debts that you listed	e notified about your bankruptcy for a comeone else, list the creditor in Part d in Part 1, list the additional creditor	1, and then list th	e collection agency he	re. Similarly, if you have	more than one
Name Addre						
-NONE-			On which line	in Part 1 did you	enter the creditor?	,
			l act / digite d	of account number	\r	

Last 4 digits of account number

		Document F	Page 18 of 3	32					
Fill in this info	rmation to identify your	case:							
Debtor 1	Carolyn Williams								
	First Name	Middle Name L	ast Name						
Debtor 2 (Spouse if, filing)	First Name	Middle Name L	ast Name						
United States B	sankruptcy Court for the:	NORTHERN DISTRICT OF ILLIN	OIS						
Case number (if known)							☐ Check	if this is	an
							amend	led filing	
Official Fo	rm 106E/F								
		Who Hove Upocoure	d Claima						40445
		Who Have Unsecure Part 1 for creditors with PRIORITY cla							12/15
Schedule G: Exec D: Creditors Who he Continuation I number (if known)	utory Contracts and Unexpir Have Claims Secured by Pro Page to this page. If you have).	hat could result in a claim. Also list ex red Leases (Official Form 106G). Do no operty. If more space is needed, copy to e no information to report in a Part, do	t include any cred he Part you need,	tors w	ith partially se ut, number the	cured c	laims that are in the boxes	listed in S on the left	Schedule t. Attach
Part 1: List	All of Your PRIORITY Un	secured Claims							
1. Do any cr	editors have priority unsecu	red claims against you?							
☐ No. Go	to Part 2.								
Yes.	vour priority unsecured claim	ms. If a creditor has more than one priorit	ty unsecured claim	list the	creditor separa	tely for	each claim. Fo	r each clai	im listed
identify wh possible, l	nat type of claim it is. If a claim ist the claims in alphabetical or	has both priority and nonpriority amounts rder according to the creditor's name. If y particular claim, list the other creditors in	i, list that claim here ou have more than	and sl	now both priority	and no	npriority amou	nts. As mu	uch as
(For an ex	planation of each type of claim	n, see the instructions for this form in the i	nstruction booklet.)						
(,	,	,	Tota	l claim	Priori	•	Nonprio	rity
2.1						amou	nt	amount	
IRS		Last 4 digits of account numb	er 2002	\$	4,811.77	\$	4,811.77	\$	\$0.00
•	Creditor's Name			- ' —		- '		- '	
_	ox 7346 elphia, PA 19101-7346	When was the debt incurred?	Recently A	ssess	sed	-			
	Street City State Zlp Code	As of the date you file, the cla	im is: Check all the	t appl	у				
Who inc	urred the debt? Check one.	☐ Contingent							
■ Debto	or 1 only	G Contingent							
☐ Debto	•	☐ Unliquidated							
☐ Debto	or 1 and Debtor 2 only	☐ Disputed							
☐ At lea	ast one of the debtors and another	ther							
	k if this claim is for a nity debt	Type of PRIORITY unsecured	claim:						
	aim subject to offset?	☐ Domestic support obligations	3						
■ No		Taxes and certain other debi	ts you owe the gove	rnmen	t				
Yes		☐ Claims for death or personal							
_ ~		Other. Specify	, , ,						
			x Liability					-	

tor 1 Carolyn Williams	Document Page 19 of 32 Case number (if know)	
IRS	Last 4 digits of account number 2011 \$ 1,018.84 \$ 1,018.84 \$ \$0.00	0
Priority Creditor's Name P.O. Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	Contingent	
Debtor 1 only	·	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another		
☐ Check if this claim is for a community debt	Type of PRIORITY unsecured claim:	
Is the claim subject to offset?	☐ Domestic support obligations	
■ No	■ Taxes and certain other debts you owe the government	
Yes	☐ Claims for death or personal injury while you were intoxicated	
	☐ Other. Specify	
	Tax Liability	
IRS	Last 4 digits of account number 2009 \$ 929.64 \$ 929.64 \$ \$0.00	0
Priority Creditor's Name P.O. Box 7346	When was the debt incurred?	
Philadelphia, PA 19101-7346 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	Contingent	
Debtor 1 only		
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another		
☐ Check if this claim is for a community debt	Type of PRIORITY unsecured claim:	
Is the claim subject to offset?	☐ Domestic support obligations	
■ No	■ Taxes and certain other debts you owe the government	
Yes	☐ Claims for death or personal injury while you were intoxicated	
	☐ Other. Specify	
	Tax Liability	

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r 1 <u>Carolyn Williams</u>								
IRS	Last 4 digits of account number 2	800	\$	381.28	\$	381.2	28 s	\$0
Priority Creditor's Name P.O. Box 7346	When was the debt incurred?		*		· * —			<u> </u>
Philadelphia, PA 19101-7346 Number Street City State Zlp Code	As of the date you file, the claim is: 0	hock all	that annly					
Who incurred the debt? Check one.	_	nieck all	шас арріу					
■ Debtor 1 only	☐ Contingent							
Debtor 2 only	☐ Unliquidated							
☐ Debtor 1 and Debtor 2 only	☐ Disputed							
☐ At least one of the debtors and another								
☐ Check if this claim is for a community debt	Type of PRIORITY unsecured claim:							
Is the claim subject to offset?	☐ Domestic support obligations							
■ No	■ Taxes and certain other debts you of	we the g	overnment					
Yes	☐ Claims for death or personal injury	vhile you	were intoxic	cated				
	☐ Other. Specify							
	Tax Liab	ility						
List All of Your NONPRIORITY Un	secured Claims							
List all of your nonpriority unsecured claim								
■ Yes. List all of your nonpriority unsecured claim unsecured claim, list the creditor separately for than one creditor holds a particular claim, list the Part 2.	r each claim. For each claim listed, identify	what type	e of claim it	is. Do not list o	claims a	Iready inclu ill out the Co	ded in Pa ontinuatio	art 1. If n on Page
List all of your nonpriority unsecured claim unsecured claim, list the creditor separately for han one creditor holds a particular claim, list the part 2.	r each claim. For each claim listed, identify he other creditors in Part 3.lf you have mor	what type e than th	e of claim it ree nonprior	is. Do not list o	claims a	already inclu ill out the Co	ded in Pa ontinuation	art 1. If m on Page n
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List all of your nonpriority unsecured claim unsecured claim, list the creditor separately for han one creditor holds a particular claim, list the creditor separately for han one creditor holds a particular claim, list the cart 2. Capital One Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans Obligations arising out of a sep not report as priority claims Debts to pension or profit-shar Other. Specify Cred	what type e than the strain that the strain th	e of claim it ree nonprior 1 ened 4/0² ve 7/30/² k all that ap greement of and other s	is. Do not list of ity unsecured of the secured of	claims a	Ilready inclu	ded in Pa	art 1. If m on Page
List all of your nonpriority unsecured claim unsecured claim, list the creditor separately for than one creditor holds a particular claim, list the Part 2. Capital One Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Type of NONPRIORITY unsecure Student loans Obligations arising out of a segnot report as priority claims Debts to pension or profit-shar	what type e than the strain that type e than the strain that t	e of claim it ree nonprior 1 ened 4/0² ve 7/30/² k all that ap greement of and other s	is. Do not list of ity unsecured of the secured of	claims a	already inclu ill out the Co	ded in Pa	art 1. If mon Page n 56

Debtor	Case 15-43508 Doc 1 1 Carolyn Williams	Filed 12/29/15 Document	Ente Page	red 12/29/15 17:17:55 21 of 32 Case number (if know)	Desc Main	
	Who incurred the debt? Check one.		_			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY	unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	Obligations arising o		ration agreement or divorce that you did		
	■ No	Debts to pension or	profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify	Parkin	g Tickets		
4.3	Collection Prof/lasalle	Last 4 digits of accoun	nt number	0244	\$	84.00
	Nonpriority Creditor's Name Po Box 416	When was the debt inc		Opened 10/01/14	· · · · · · · · · · · · · · · · · · ·	
	La Salle, IL 61301 Number Street City State Zlp Code	As of the date you file,	the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	■ Debtor 1 only					
	☐ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY	unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	Obligations arising o		ration agreement or divorce that you did		
	■ No			g plans, and other similar debts		
	Yes	Other. Specify	Collec Depar	tion Attorney Yorkville Police tment		
4.4	Commonwealth Edison	Last 4 digits of accour	nt number		\$	1,300.00
	Nonpriority Creditor's Name 3 Lincoln Center 4th Floor Attn Bankruptcy Section	When was the debt inc	curred?			
	Oakbrook Terrace, IL 60181 Number Street City State Zlp Code	As of the date you file,	the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	■ Debtor 1 only					
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY	unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	Obligations arising o not report as priority clai		ration agreement or divorce that you did		
	■ No	☐ Debts to pension or	profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify	Electri	c Bill		
4.5	Dept Of Ed/Nelnet	Last 4 digits of accour	nt number	7012	\$	1,711.00
	Nonpriority Creditor's Name					

Entered 12/29/15 17:17:55 Case 15-43508 Doc 1 Filed 12/29/15 Desc Main Document Page 22 of 32 Debtor 1 Carolyn Williams Case number (if know) Attn: Claims Opened 2/01/14 Last Po Box 82505 When was the debt incurred? Active 11/30/15 Lincoln, NE 68501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.6 1,504.00 Dept Of Ed/Nelnet 3112 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Opened 6/01/13 Last Po Box 82505 When was the debt incurred? Active 11/30/15 Lincoln, NE 68501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community Student loans Is the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify Educational 4.7 Dept Of Ed/Nelnet 7111 4.249.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Opened 10/01/12 Last Po Box 82505 When was the debt incurred? Active 11/30/15 Lincoln, NE 68501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Check if this claim is for a community Student loans Is the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did

■ No
□ Yes

Debts to pension or profit-sharing plans, and other similar debts

Educational

not report as priority claims

Other. Specify

Case 15-43508 Doc 1 Filed 12/29/15 Entered 12/29/15 17:17:55 Desc Main Document Page 23 of 32 Case number (if know)

Debtor	1 Carolyn Williams	——————	Case number (if know)	
4.8	Dept Of Ed/Nelnet	Last 4 digits of account number	7011	\$ 3,560.00
	Nonpriority Creditor's Name Attn: Claims Po Box 82505	When was the debt incurred?	Opened 10/01/12 Last Active 11/30/15	
	Lincoln, NE 68501 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims	aration agreement or divorce that you did	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educa	tional	
4.9	Dept Of Ed/Nelnet	Last 4 digits of account number	3012	\$ 2,543.00
	Nonpriority Creditor's Name Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 6/01/13 Last Active 11/30/15	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Educa	itional	
4.10	Dryer Medical Clinic	Last 4 digits of account number		\$ 1,393.35
	Nonpriority Creditor's Name PO Box 2091 Aurora, IL 60507	When was the debt incurred?		_
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	

Debtor	1 Carolyn Williams	Document Page	24 of 32 Case number (if know)	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims	ration agreement or divorce that you did	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Medica	al Bill	
4.11	Fingerhut Nonpriority Creditor's Name	Last 4 digits of account number	8319	\$ 435.00
	6250 Ridgewood Rd St Cloud, MN 56303	When was the debt incurred?	Opened 12/01/14 Last Active 7/28/15	
-	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	Ü		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another			
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims	ration agreement or divorce that you did	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Charg	e Account	
4.12	Firts Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	2709	\$ 976.00
	601 S Minneapolis Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 6/01/14 Last Active 7/21/15	
-	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	_		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims	ration agreement or divorce that you did	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Credit	Card	
4.13	Fort Sill National Ban	Last 4 digits of account number	9284	\$ 1,425.00
	Nonpriority Creditor's Name 511 Sw A Ave Lawton, OK 73501	When was the debt incurred?	Opened 10/01/11	

Debtor	Case 15-43508 Doc 1 Carolyn Williams	Filed 12/29/15 Entered 12/2 Document Page 25 of 32 Case nur	29/15 17:17:55 mber (if know)	Desc Main	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all the			
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreem not report as priority claims	ent or divorce that you did		
	■ No	☐ Debts to pension or profit-sharing plans, and o	ther similar debts		
	Yes	■ Other. Specify Deposit Related			
4.14	Illinois Tollway	Last 4 digits of account number		\$ 1	10,000.00
	Nonpriority Creditor's Name Attn: Legal Dept 2700 Ogden Ave	When was the debt incurred?			
	Downers Grove, IL 60515 Number Street City State Zlp Code	As of the date you file, the claim is: Check all th	nat apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreem not report as priority claims	ent or divorce that you did		
	■ No	Debts to pension or profit-sharing plans, and o	ther similar debts		
	Yes	■ Other. Specify Tollway Violation:	S		
4.15	Med Business Bureau	Last 4 digits of account number 4730		\$	71.00
	Nonpriority Creditor's Name Po Box 1219 Park Ridge, IL 60068	When was the debt incurred? Opened	7/01/15		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all the	nat apply		
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreem not report as priority claims	ent or divorce that you did		
	■ No	☐ Debts to pension or profit-sharing plans, and o	other similar debts		
	Yes	Other. Specify Collection Attorned Associates Ltd	ey Med1 02 Anesthes	sia	
4.16	Sierra Auto Finance LI	Last 4 digits of account number 0001		\$	0.00

Nonpriority Creditor's Name

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED.

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate

tasks and functions for the attorney amd support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 310.00
- 3. Before signing this agreement, the attorney has received, \$ 500.00 toward the flat fee, leaving a balance due of \$ 3500.00 ; and \$ 57.00 for expenses, leaving a balance due for the filing fee of \$ 310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 12/29/2015

Signed:

Carolyn Williams

William Joseph Weiler ARDC # 3301154

Debtor(s)

Do not sign this agreement if the amounts are blank.

Salt Lake City, UT 84130

Capital Orcase 15-43508 Doc 1 Filedel 2/29/15 Entered 12/29/15 17:17:55 Ta Deste Main nance Ll Attn: Bankruptcy 6250cRinegrewopaged32 of 32 5005 Lbj Fwy Ste 700 Po Box 30285 St Cloud, MN 56303 Dallas, TX 75244

city of chicago parking Firts Premier Bank Sprint
121 N Lasalle Street ROOM 107A601 S Minneapolis Ave Chicago, IL 60602 Sioux Falls, SD 57104 Kansas City, MO 64121

United City of Yorkville

Collection Prof/lasalle Fort Sill National Ban Po Box 416 La Salle, IL 61301 Lawton, OK 73501

511 Sw A Ave

WSB Dept # 2040 PO Box 5905 Carol Stream, IL 60197-5

Commonwealth Edison Illinois Tollway
3 Lincoln Center 4th Floor Attn: Legal Dept
Attn Bankruptcy Section 2700 Ogden Ave Oakbrook Terrace, IL 60181 Downers Grove, IL 60515

University Of Phoenix 4615 E Elwood St Fl 3 Phoenix, AZ 85040

Dept Of Ed/Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

IRS P.O. Box 7346
Philadelphia, PA 19101-7346 Oak Park, IL 60302

Village of Oak Park

Dept Of Ed/Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

IRS P.O. Box 7346 Philadelphia, PA 19101-7346

Dept Of Ed/Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

IRS P.O. Box 7346 Philadelphia, PA 19101-7346

Dept Of Ed/Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

IRS P.O. Box 7346 Philadelphia, PA 19101-7346

Dept Of Ed/Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501 Med Business Bureau Po Box 1219 Park Ridge, IL 60068

Dryer Medical Clinic PO Box 2091 Aurora, IL 60507

Santander Consumer USA Po Box 961245 Fort Worth, TX 76161